| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | *(signature)* | 678P | 3/17/co |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | 69055 | 5-18-00 |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

✔ ............................. Rejected     N ........................... Non-elected
= ............................. Allowed     I ............................ Interference
− (Through numeral)... Canceled     A ........................... Appeal
÷ ............................. Restricted     O ........................... Objected

| Claim Final | Original | Date | | | | | |
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| | 51 | ÷ | ✔ | ✔ | ✔ | | |
| | 52 | | | ✔ | ✔ | ✔ | |
| | 53 | | | ✔ | ✔ | ✔ | |
| | 54 | | | ✔ | ✔ | ✔ | |
| | 55 | | ✔ | ✔ | ✔ | ✔ | |
| | 56 | | N | N | N | | |
| | 57 | | | | N | | |
| | 58 | | | | N | | |
| | 59 | ÷ | N | N | N | | |
| | 60 | | | | ✔ | ✔ | |
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| Claim Final | Original | Date |
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*(First column, claims 1-50 — heavily marked; claims 1-27 appear canceled/struck through, followed by:)*

| Claim Final | Original | Date | | | | |
|---|---|---|---|---|---|---|
| | 28 | ÷ | ✔ | ✔ | ✔ | ✔ |
| | 29 | | O | | ✔ | ✔ |
| | 30 | | O | | ✔ | ✔ |
| | 31 | ÷ | O | | ✔ | ✔ |
| | 32 | | O | | ✔ | ✔ |
| | 33 | | O | | ✔ | ✔ |
| | 34 | | O | | ✔ | ✔ |
| | 35 | | ✔ | O | | ✔ |
| | 36 | | N | N | N | |
| | 37 | | | | N | |
| | 38 | | | | N | |
| | 39 | | | | N | |
| | 40 | | N | N | N | |
| | 41 | | ✔ | ✔ | ✔ | ✔ |
| | 42 | | | ✔ | ✔ | ✔ |
| | 43 | | | ✔ | ✔ | ✔ |
| | 44 | | ✔ | ✔ | ✔ | ✔ |
| | 45 | | ✔ | ✔ | ✔ | |
| | 46 | | ✔ | ✔ | ✔ | |
| | 47 | | ✔ | ✔ | ✔ | |
| | 48 | | ✔ | ✔ | ✔ | |
| | 49 | | ✔ | ✔ | ✔ | ✔ |
| | 50 | ÷ | ✔ | ✔ | ✔ | ✔ |

If more than 150 claims or 10 actions
staple additional sheet here

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